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PENISTONE
URBAN DISTRICT COUNCIL



ANNUAL REPORT
of the
Medical Officer of Health
for the Year
1968

PENISTONE URBAN DISTRICT COUNCIL.

HEALTH COMMITTEE, 1968.

COUNCILLOR W. GLEDHILL, J.P. (Chairman of Committee)

- " J.B. DELAFAILLE (Vice-Chairman of Committee)
- " A. MEARS (Chairman of Council)
- " J.R. ATKINSON (Vice-Chairman of Council)
- " E.G. CROSSLAND
- " A. DIXON
- " C.H. EDWARDS
- " T.H.S. HINCHLIFF
- " Mrs. C. KELLETT
- " C.R. MARSDEN
- " W. MURPHY
- " Mrs. E.M. PALMER
- " G.J. PUNT
- " A.J. ROWLEY
- " R.M. SMYTHE

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health.

F.C. ARMSTRONG, M.B., Ch.B., D.P.H. (St. Andrews)

Surveyor and Chief Public Health Inspector.

D. TUTIN, M.A.P.H.I., Cert. S.I.E.J.B., Cert. M. & F.I.

Assistant Surveyor and Additional Public Health Inspector.

M. DAVIES, D.P.H.I.E.B., M.A.P.H.I.

Authorised Meat Inspector.

S.J. RHODES, M.Inst.M., M.R.S.A.

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PENISTONE URBAN DISTRICT COUNCIL.

Annual Report of the Medical Officer of Health
for the year 1968.

To the Chairman and Members of Penistone Urban District Council.

Ladies and Gentlemen,

I have the honour to present my Annual Report upon the Health Services of the Penistone Urban District for the year ended 31st December, 1968. I also include some details of the Part III services provided by the Local Health Authority during the period under review.

The Birth Rate, at 17.9, is increased from 16.2 in 1967; the corrected rate is 18.6. The Death Rate was 13.3, the corrected rate being 13.4. The Still-birth Rate was 7.3, compared with 46.5 in 1967; this represents one still-birth, as against six in 1967. The Infantile Mortality Rate was 14.7, compared with 32.5 in 1967; this represents two deaths.

None of these statistics is unduly out of line with the national figures.

As before, the outstanding sections in the principal causes of death are circulatory disease and respiratory disease.

From the recent dramatic publicity on cardiac surgery, you can deduce the amount of time and resources being devoted to this problem, so far with moderate success. There is, of course, a great deal of work going on into the problem as a whole, but not publicised in such a manner.

Respiratory disease has many causes, e.g. working situations such as mining, smoking, and also atmospheric pollution. Working conditions are improving year by year; there is a national campaign of some years standing, to reduce atmospheric pollution and, slowly, the health education on smoking is beginning to have some small effect.

The general picture of infectious diseases is a satisfactory one. The annual fluctuations are almost entirely due to measles. At the time of writing I am beginning, along with the local doctors, a campaign for measles immunisation. Previous attempts have been relatively unsuccessful due to vaccine supply difficulties. This time, however, I have all the necessary vaccine, and expect good results.

Another year has gone by with no definite move that I know of to proceed with fluoridation of the water supply. On all the available evidence, this is a first-class public health measure.

Mr. Tutin, the Senior Public Health Inspector, has prepared that part of the report that deals with the sanitary circumstances. The total number of houses in the area has increased from 2,848 to 2,909, one dwelling being declared unfit during the year. As before, approximately 98% of these houses are connected to main sewers; the remainder have satisfactory private drainage. During the year 29 samples were taken from the public water supply for chemical analysis; these were all satisfactory. 392 samples were examined bacteriologically, and only two were found to be below standard.

In conclusion, I would like to thank the Chairman and members of the Health Committee for their support and assistance during the year. I would also like to thank my colleagues on the Council staff for their co-operation and advice.

I am,

Yours faithfully,

F.C. ARMSTRONG

Medical Officer of Health.

DISTRICT STATISTICS IN BRIEF.

The Penistone Urban District covers an area of 5,593 acres. The district is divided into 3 parts - Penistone; Thurlstone and Hoylandswaine.

The Rateable Value of the district at the 1st April, 1968 was £222,226, whilst the product of a penny rate was £805. 13s. 6d.

VITAL STATISTICS.

POPULATION.

The Registrar-General has given his estimation of the population at mid 1968 as 7,590. This is the same as for 1967.

BIRTHS.

There were 136 live births registered in the district during the year; of these 67 were males and 69 females. There were 5 illegitimate births (2 male and 3 female).

The uncorrected BIRTH RATE was 17.9 per 1,000 of the estimated population. After application of the Comparability Factor (1.04) issued by the Registrar-General, the corrected Birth Rate was 18.6.

STILL-BIRTHS.

There was 1 still-birth (female) registered in the district during the year.

DEATHS.

101 deaths were attributed to the district during 1968; of these 50 were males and 51 females.

The CRUDE DEATH RATE was, therefore, 13.3 per 1,000 of the estimated population. By application of the Death Comparability Factor (1.01) the corrected rate was 13.4.

Set out below are tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the country. From these tables it can be seen how the district compares with the country generally.

RATES PER 1,000 OF THE ESTIMATED POPULATION.

<u>Year.</u>	<u>England and Wales.</u>	<u>West Riding Administrative County.</u>	<u>Penistone U.D.</u>	
			<u>Crude Rate.</u>	<u>Corrected Rate.</u>

LIVE BIRTHS

1968	16.9	17.6	17.9	18.6
1967	17.2	18.0	16.2	16.9
1966	17.7	18.0	16.9	17.6
1965	18.0	18.2	15.0	

DEATHS

1968	11.9	11.6	13.3	13.4
1967	11.2	11.2	12.8	12.7
1966	11.7	12.1	13.7	13.8
1965	11.5	11.6	13.0	

<u>Year.</u>	<u>England and Wales.</u>	<u>West Riding Administrative County.</u>	<u>Penistone U.D.</u>
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STILL-BIRTHS
(Rates per 1,000 Live and Still-births)

1968	14.3	14.3	7.3
1967	14.8	15.2	46.5
1966	15.4	14.4	7.9
1965	15.7	16.0	26.5

INFANT MORTALITY.

There were 2 deaths of children under one year of age during 1968, equivalent to an Infantile Mortality Rate of 14.7 per 1,000 Live Births.

AGE DISTRIBUTION OF INFANT DEATHS.

<u>Cause of Death.</u>	<u>Under 1-wk.</u>	<u>1-2 wks</u>	<u>2-3 wks</u>	<u>3-4 wks</u>	<u>Total under 4-wks.</u>	<u>1-3 mths</u>	<u>3-6 mths</u>	<u>6-9 mths</u>	<u>9-12 mths</u>	<u>Total under 1-yr.</u>
Multiple Congenital Malformation.	1	-	-	-	1	-	-	-	-	1
Atelectasis.	1	-	-	-	1	-	-	-	-	1
TOTALS :	2	-	-	-	2	-	-	-	-	2

MATERNAL MORTALITY.

There were no maternal deaths during the year.

EPIDEMIC DISEASES.

There were no deaths in the Epidemic Diseases (other than Tuberculosis) Group during the year.

PRINCIPAL CAUSES OF DEATH.

<u>CANCER.</u>	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Stomach	-	-	-
Lung	1	-	1
Breast	-	1	1
Other sites, including Leukaemia	7	4	11
Uterus	-	-	-
<u>DIABETES.</u>	-	1	1
<u>VASCULAR DISEASE OF NERVOUS SYSTEM.</u>	-	-	-
<u>CIRCULATORY SYSTEM.</u>			
Ischaemic Heart Disease	13	12	25
Hypertension with Heart Disease	-	2	2
Other Heart Diseases	3	5	8
Other Circulatory Disease	4	2	6

PRINCIPAL CAUSES OF DEATH (Contd.)

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Bt. Fwd.	28	27	55
<u>CIRCULATORY SYSTEM (Contd.)</u>			
Chronic Rheumatic Heart Disease	1	-	1
Cerebro-vascular Disease	8	14	22
<u>RESPIRATORY SYSTEM.</u>			
Pneumonia	1	3	4
Bronchitis and Emphysema	7	2	9
Influenza	-	-	-
TB of Respiratory System	-	1	1
Other Diseases of Respiratory System	1	1	2
<u>DIGESTIVE SYSTEM.</u>			
Gastritis, Enteritis and Diarrhoea	-	-	-
Ulcer of Stomach and Duodenum	-	-	-
<u>GENITO-URINARY SYSTEM.</u>	1	-	1
<u>CONGENITAL ANOMALIES.</u>	1	1	2
<u>BIRTH INJURY - DIFFICULT LABOUR, etc.</u>	-	1	1
<u>VIOLENCE.</u>			
Motor-vehicle Accidents	-	1	1
Suicide	-	-	-
All other accidents	2	-	2
<u>OTHER DEFINED and ILL-DEFINED DISEASES.</u>	-	-	-
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All causes :	50	51	101
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AGE DISTRIBUTION OF DEATHS.

<u>AGE GROUP.</u>	<u>MALE.</u>	<u>FEMALE</u>
Under 1 year	-	2
1 - 10 years	1	-
10 - 15 years	-	-
15 - 25 years	-	-
25 - 45 years	3	2
45 - 65 years	11	9
Over 65 years	35	38
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TOTAL :	50	51
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INQUESTS.

Four Inquests were held, and in 7 cases the cause of death was certified by the Coroner after Post-mortem Examination without inquest.

NATIONAL HEALTH SERVICE ACTS, 1946/57.

Vital Statistics.

Live Births

Number 136

Rate per 1,000 population 17.9

Illegitimate Live Births per cent of total live births 3.6

Still-births

Number 1

Rate per 1,000 total live and still-births 7.3

Total Live and Still-births 137

Infant Deaths (deaths under 1 year) 2

Infant Mortality Rates

Total infant deaths per 1,000 total live births 14.7

Legitimate " " " " legitimate live births 15.2

Illegitimate " " " " illegitimate " " -

Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) 14.7

Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births) 14.7

Perinatal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births) 21.9

Maternal Mortality (including abortion)

Number of deaths -

Rate per 1,000 total live and still-births -

AGE DISTRIBUTION OF INFECTIOUS DISEASES.

DISEASE	AGE GROUP													TOTALS	
		0 - 1 yr.	1 - 2 yrs.	2 - 3 yrs.	3 - 4 yrs.	4 - 5 yrs.	5 - 10 yrs.	10 - 15 yrs.	15 - 25 yrs.	25 - 35 yrs.	35 - 45 yrs.	45 - 65 yrs.	65 yrs. & over		Age unknown
Measles		-	7	16	22	11	10	30	-	2	-	-	-	1	99
Scarlet Fever		-	1	-	1	2	5	2	-	-	-	-	-	1	12
Whooping Cough		-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery		-	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning		-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Pneumonia		-	-	-	-	-	-	-	-	1	1	-	-	-	2
Meningococcal Infection		-	-	-	-	-	-	-	-	-	-	-	-	-	-
Infective Jaundice		-	-	-	-	-	2	2	-	-	-	-	-	-	4
Puerperal Pyrexia		-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Poliomyelitis		-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS :		-	8	16	23	13	17	34	-	3	1	-	-	2	117

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS
AND OTHER DISEASES.

Infectious Diseases other than Tuberculosis.

During the year 117 cases of Infectious Disease were notified.
They were as follows :-

Scarlet Fever	12
Measles	99
Pneumonia	2
Whooping Cough	-
Dysentery	-
Food Poisoning	-
Meningococcal Infection	-
Infective Jaundice	4
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	117
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ATTACK RATE OF COMMONER INFECTIOUS DISEASES.

<u>Disease</u>	<u>England and Wales</u>	<u>West Riding Administrative County</u>	<u>Penistone U.D.</u>
Measles	4.86	8.62	13.04
Whooping Cough	0.36	0.33	0.00
Scarlet Fever	0.31	0.45	1.58
Poliomyelitis (Paralytic)	0.00	0.00	0.00
Dysentery	0.40	0.39	0.00
Typhoid Fever	0.00	0.00	0.00

SCARLET FEVER.

During the year there were 12 cases of Scarlet Fever notified, 23 less than in the previous year. The attack rate was 1.58, compared with a rate of 0.31 for England and Wales and 0.45 for the West Riding Administrative County. 2 cases were notified during the first quarter and 1 during the second quarter, 1 in the third quarter and 8 in the fourth quarter. As usual, the majority of these cases occurred in the 5 - 10 years age group. Being a droplet spread infection, it clearly tends to occur most when children are first brought together in an enclosed space, i.e. in the early years in school. The fluctuations in this attack rate are not particularly significant, since the total numbers involved are small.

DIPHTHERIA.

No cases of Diphtheria were notified during 1968. During this year we continued the computer scheme for recording immunisation. As I explained in your last report, this use of the computer is designed to keep a very close check on those children who have not been immunised at the appropriate age, and to continue to issue repeat invitations to the parents to have the procedure carried out. As a result of this we have achieved a much higher rate of immunisation in the divisional area. The figures for 1968 are deceptively reduced, the reduction being caused by the commencement of a new immunisation schedule on 1st April, 1968.

			<u>1968</u>	<u>1967</u>
Primary immunisations	...	...	877	1,309
'Booster' doses	...	...	1,121	1,075

WHOOPIING COUGH.

There were no cases of Whooping Cough notified during 1968.

The vast majority of the children who contract Whooping Cough when they have been immunised suffer the disease to a relatively mild degree; in fact, a great many children probably have the disease to such a mild degree that it is unrecognizable as clinical Whooping Cough. In the divisional area 877 children were immunised during 1968, compared with 1,301 during 1967. This figure is lower than that for last year, the reason being that in April of 1968 we switched over to the new Ministry recommended schedule of immunisation, which delayed primary immunisation to the age of six months. As a result of this delay the figures from April, 1968 to April, 1969 are, therefore, reduced.

MEASLES.

In 1968 there were 99 cases of Measles notified; in the previous year there were 29, and in the year before that, 175. There were 16 cases in the second quarter, 81 in the third quarter and 2 in the fourth. Of the total, 49 cases occurred in Penistone, 16 in Millhouse, 28 in Thurlstone and 6 in Cubley. The attack rate for the district was 13.04, which is greater than that for the West Riding Administrative County and also greater than that for England and Wales as a whole. I don't read anything sinister into this situation, as a great deal depends upon which time of the year the outbreak of Measles hits the varying parts of the country and whether, in fact, each outbreak affects the country uniformly. At the time of writing we are about to undertake, for the second time, an immunisation programme against Measles. Early in 1969 an immunisation programme was only just begun, when difficulties over vaccine supply halted it.

POLIOMYELITIS.

There were no cases of Poliomyelitis notified during the year for your district. You will notice from the table on page 8 that there were no cases of Poliomyelitis notified for England and Wales or for the West Riding Administrative County. There can be very little doubt that this is due to the vaccination programme. Like all other vaccination programmes, once begun it is imperative that it continue. The computer method of recording immunisation is of assistance in maintaining a high degree of vaccination, because it issues individual invitations to each child known to reside within the area. Below is given a table showing the immunisation figures for the Division as a whole.

VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1968.

TABLE 1.

Completed Primary Courses - Number of persons under age 16.

Year of birth					Others under age 16	Total
1968	1967	1966	1965	1961-64		
315	536	14	7	28	2	902

The reduced number is accounted for by the change-over in the immunisation schedule, as was described in the paragraph relating to Whooping Cough.

TABLE 2.

Reinforcing Doses - Number of persons under age 16.

Year of birth					Others under age 16	Total
1968	1967	1966	1965	1961-64		
-	239	61	10	769	5	1,084

INFECTIVE JAUNDICE.

There were 4 cases notified in the fourth quarter, 2 male and 2 female. This is the first year during which Infective Jaundice became a notifiable disease. I have no reason to suppose that these figures we have now indicate any different situation to that which existed previously. In future years we will be able to compare the statistics with those of preceding years.

SMALLPOX.

There were no cases of Smallpox notified in the area in 1968. A total of 588 persons within the divisional area received primary vaccination, compared with 583 during 1967. As I have said on previous occasions, primary vaccination carries very slight risk with it; unfortunately, the risk increases with age. It is known that the least possible risk is incurred between the ages of 1 and 2 years, therefore it is immediately clear that the proper time to have the procedure carried out is in the second year of life. Revaccination does not carry the risks associated with primary vaccination.

DISEASES OF THE ALIMENTARY TRACT.

There were no cases of Food Poisoning or Dysentery notified during 1968. As I have said on many occasions in the past, both in reports and at Health Committee meetings, the control of these bowel infections is very largely dependent on personal hygiene, not only by the handlers of food in shops, but also on the part of all the public. Even with the greatest care there must occasionally be a transfer of infection from a carrier of a disease to the general public, but if everyone took the appropriate precautions, then this sort of outbreak could be kept to a bare minimum. The answer, therefore, is continuous and perhaps intensified health education.

TUBERCULOSIS.

During 1968 there were 2 cases of Tuberculosis notified, 1 male and 1 female, the latter being admitted to Wathwood Hospital. Both these cases were pulmonary.

The hard work of the hospital staff and our own, in following up contacts of the known disease and examining them for early detection of secondary disease, has continued. The Mass Radiography Service continues, whenever possible, to visit the area, but no member of the public need wait for such an occasion to arise because the Mass Radiography Centre in the city is permanently available.

We were fortunate during 1968 that the Mass Radiography Unit visited the Child Welfare Centre, Shrewsbury Road.

B.C.G. VACCINATION.

All children in their first year in the Secondary School were offered vaccination against Tuberculosis. 244 children were skin tested; 227 of these were vaccinated. 9, who showed a positive skin reaction, did not require vaccination. 8 were absent, and they will be offered vaccination next year. The vaccination itself causes very little trouble, and we usually have a high rate of acceptance.

B.C.G. Vaccination is one of a number of preventive measures against tuberculosis infection; the others are improving housing conditions and improving nutrition, plus a better general understanding of the vital factors in maintaining good general health. This, along with the early detection of the disease through the National Health Service, and principally the Mass Radiography Service, is the reason for the present reasonably satisfactory control of tuberculosis.

GENERAL PROVISION OF THE HEALTH SERVICES.

HOSPITALS.

The general hospitals for the Penistone area are normally those in Barnsley and Sheffield. For some outlying parts of the district, however, the Huddersfield hospitals are more convenient.

Infectious Diseases cases are accommodated at Lodge Moor, Sheffield. Maternity cases are dealt with at the Chapeltown Maternity Home, St. Helen Hospital, Barnsley, and the Princess Royal Maternity Home, Huddersfield.

CERVICAL CYTOLOGY.

During the year we continued the service of taking cervical smears for the detection of early carcinoma of the cervix. We have continued the policy of seeking those women most at risk, i.e. over 35 years of age with 4 or more children, but have also taken in any other married women who were anxious to have the test carried out. We have not sought to publicise this very widely, but have preferred rather to seek the cases through our own nurses and through the general practitioner service, since the number of smears available is still limited, and this relative shortage of smear facilities in the laboratory is the controlling factor in the numbers we try to encourage to the clinic. The number of positive tests have been very small indeed, but we sincerely hope, as a result of having discovered these positives, that the ladies concerned will enjoy a normal life span.

LABORATORY FACILITIES.

The Public Health Laboratories at Wakefield and Sheffield are available to provide all the necessary investigations we may require in the epidemiological field. The respective Medical Directors are most willing to help and advise, and I am grateful to them.

MORTUARY.

There is a Mortuary in Penistone, and this serves the surrounding area.

AMBULANCE SERVICE.

The West Riding County Council provide ambulance facilities in accordance with the requirements of Section 27 of the National Health Service Act, 1946.

During the year no difficulty was experienced regarding staffing, and the full complement of staff of 39, plus one Station Officer, worked a three-shift system from the main operational depot at Hoyland, with an alternating shift at the new Penistone Depot, which was officially opened during 1966. There are six vehicles at Hoyland and one ambulance car, and three at Penistone.

Liaison with all hospitals continues at a high level, and the Authority continues to work most amicably with neighbouring County Boroughs.

Ambulance calls from doctors, hospitals, institutions and members of the public, in emergencies, are received at the Station Control Room, and are competently dealt with by the efficient use of a radio communication system, ensuring speed and economical use of the vehicles, and at the same time reducing mileage to the minimum.

The majority of the ambulance personnel are competent to render first aid, and staff are encouraged to train and obtain current certificates, the County Council giving monetary recognition by way of extra pay as an incentive to qualification.

CLINICS.

Below are the tables showing the various clinics held within the Penistone District and, in certain cases, figures indicating the number of attendances during 1968.

CHILD WELFARE CENTRES.

Name and Address of Centre. Name of Doctor and Nurse in attendance.	Day and Time of sessions.	Total number of attendances during the year.	
		Number who attended for first time during 1968.	Children up to 5 years.
PENISTONE Shrewsbury Road. Dr. J.M. Clarke Mrs. D. Gibson Mrs. H. Dransfield	Monday p.m.	415	2,083
CAWTHORNE Golf House. Dr. J.M. Clarke Mrs. D. Gibson	Alternate Wednesdays p.m.	74	296
MOBILE CLINIC - MILLHOUSE GREEN Dr. M.R. McGinty Mrs. H. Dransfield	Alternate Thursdays a.m.	64	278
MOBILE CLINIC - THURGOLAND Dr. M.R. McGinty Mrs. D. Gibson	Alternate Thursdays p.m.	68	314

Other Clinics held at Shrewsbury Road include :-

- Ophthalmological; Ante-natal Relaxation Classes;
- Chiropody; Speech Therapy.

An Ante-natal Clinic is held at Shrewsbury Road Clinic every Tuesday. The general practitioners in Penistone attend alternate weeks, with the exception of the fifth Tuesday. The Midwives attend the clinics each week, and occasionally the Health Visitor is also present.

TUBERCULOSIS.

Those people suffering from Tuberculosis are referred to the Chest Clinic at 46, Church Street, Barnsley. At this clinic complete investigation is possible, including X-ray. The Tuberculosis Health Visitor also attends and is present when the patient is seen by the Consultant. She is able to maintain a liaison between the Consultant and the domestic environment, which is a most valuable contribution to the patient's general welfare, since her main job is the follow-up of contacts to try to restrict the spread of this disease. Her presence at the Chest Clinic is invaluable, since she gets very early information, in detail, of who the contacts were and where they are to be found.

HEALTH VISITING SERVICE.

The Health Visitor has a multitude of duties which are much too numerous to detail here; suffice it to say that she plays a large part in tying up the loose ends in our National Health Service, and also is very actively engaged in dealing with the other social services for the overall benefit of those in need. It is by no means an easy job to undertake. There are changes in the social services and in the Health Service being discussed at the moment, and my own impression is that the changes in the health visitors' duties will be ultimately to the benefit of both the health visitors and the community.

The health visitors made a total of 3,222 visits. There were, in addition to these, a number of visits made by health visitors outside this Division, this being caused by the attachment of staff.

The Health Visiting Staff as at 31st December, 1968 :-

<u>Name.</u>	<u>Address.</u>	<u>Telephone No.</u>
Mrs. H. Dransfield.	"Casamia", Moorend Lane, Silkstone Common, Barnsley.	Silkstone 302.
Mrs. D. Gibson.	Blacker House, 133, Blacker Road, Mapplewell, Barnsley.	Darton 2100.

HOME NURSING SERVICE.

During the year staff remained stable, and attachment to general practitioner units took place. Relief duties were provided by Mrs. Wilsden and Mrs. Harding. The home nurse undertakes nursing care within the domiciliary field, in addition to the giving of injections, general nursing procedures, and pre-operative preparation of patients requiring hospital treatment. She is actively engaged in the rehabilitation of the handicapped and geriatric patients. Nursing aids, incontinent sheets and pads and equipment are made available under the County loan scheme. During the year the number of cases visited was 217 and the total visits paid was 7,867. Both areas (Rural and Urban) are included in these figures.

The staff as at 31st December, 1968 :-

<u>Name.</u>	<u>Address.</u>	<u>Telephone No.</u>
Mrs. M.E. Henderson.	6, Greno' View, Hood Green, Stainborough.	Silkstone 293.
Mrs. J.M. Snell.	3, Windmill Lane, Thurlstone.	Penistone 2451.

MIDWIFERY SERVICE.

During the year the midwifery staff remained the same. The Midwives attend ante-natal classes in the general practitioners' surgery and the Local Health Authority Clinic; this means that there is a close working relationship with the practitioners within the area. In addition, they attend ante-natal and relaxation classes, when filmstrips, sound films and visual aids are used to prepare the expectant mother for her forthcoming confinement. The Health Visitor attends certain of the classes, to discuss prophylactic measures available for the newly-born against certain diseases.

During 1968 the Midwives attended 30 cases as Midwives and 33 as Maternity Nurses. In 37 cases Pethidine was administered and in 8 cases Trilene Analgesia was used.

The Midwives available as at 31st December, 1968 :-

<u>Name.</u>	<u>Address.</u>	<u>Telephone No.</u>
Mrs. D. Bowe.	"Plevna", Silkstone Common.	Silkstone 552.
Miss K. Sykes.	34, Victoria Street, Penistone.	Penistone 2267.

DOMESTIC HELP SERVICE.

There were 6,902 Domestic Help hours provided in the district during 1968, compared with 6,377 in 1967. In all, 13 Domestic Helps were employed in 65 homes. There were 41 cases continuing from 1967, and the following table explains the type of cases involved :-

General cases, 65 years and over	...	57
General cases under 65 years	...	4
Mentally ill under 65 years	...	1
Maternity cases	...	2
Others	...	1
		<hr/> 65 <hr/>

I think that any home which has experienced the need for a Home Help, and had the need met, will readily appreciate how valuable a service this is. If it is the intention for the future, as appears to be the case, that patients will be kept where the vast majority of them would prefer to be, i.e. in their own homes, then there is no doubt that this service must expand considerably.

CHIROPODY SERVICE.

During 1968, 137 patients received 662 treatments at the clinic; 114 patients received 340 treatments in their own homes. This compares with 134 patients who received clinic treatment and 112 patients who received treatment at home in 1967.

Taken alongside all the other supporting services for the handicapped and the elderly, this service is another valuable addition. In the past it was not uncommon for an elderly person to become bedfast for no other reason than that their feet were painful. With someone of really advanced years it only requires a week or two in bed for the situation to become permanent.

HEALTH EDUCATION.

CLINICS.

No matter what activity is taking place in any clinic, health education forms sometimes a small part and often a large part of the general conduct. Posters and other literature are, of course, used. Group discussions, including care of the hair, teeth, skin, feet and diet, personal hygiene and home safety, are held. In addition to this, all staff (Medical, Public Health Inspectors and Nurses) are actively engaged in health education on every visit they make, because in the vast majority of instances an explanation is given for every instruction issued. In talking of health education, one must not forget the mass media, i.e. the television and newspaper source; although the quality of the material can sometimes be called in question, nevertheless I am sure we have all noticed the amount of educational material which is broadcast.

MOTHERCRAFT AND RELAXATION CLASSES.

These classes are held in the Child Welfare Centre at Shrewsbury Road. The relaxation exercises are generally held to be beneficial; in addition to this it allows a number of expectant mothers to meet and discuss with each other their various trials and tribulations. There is no doubt that this is an example of a worry shared being a worry halved. The health visitor also talks to the mothers during these meetings about the general care of their babies and the value of immunisation.

CHILD WELFARE CLINICS.

These are held weekly (Monday) at Shrewsbury Road, and each alternate Wednesday at the Golf House, Cawthorne. These days we are asking the health visitor to take a more and more important role in the baby clinic, e.g. most of the immunisation is now done by the health visitor, and with the current shortage of medical staff this has been an enormous help. The Medical Officer now sees those children who are referred by the health visitor.

The Mobile Child Welfare Clinic visits Millhouse Green and Thurgoland each alternate Thursday, where the services afforded to the public are the same as those at the static clinics. As always, those ladies who come voluntarily to help at the Child Welfare Clinics provide a most valuable service, and we all appreciate their efforts very much.

EYE CLINIC.

Sessions for patients residing in the Penistone district (both Urban and Rural areas) are held in the Shrewsbury Road Clinic one half-day or full day, on Tuesday, as the need arises. The list of children requiring examination is supplied to the Consultant Ophthalmologist, who attends personally to see those children. All but a very few are referred to him by School Medical Officers. During 1968 there were 157 attendances, of which 49 were new cases. Spectacles were provided in 60 instances.

HOME SAFETY.

For yet another year Penistone has been fortunate in having an active Home Safety Committee. Many official bodies, including my own department, are involved in this subject, but, as so often happens, there is still plenty of scope for a voluntary group as well. Your committee have worked hard to supplement the efforts of the others. As always, it is difficult to produce statistics to prove success, but as in other fields, no attempt at education is lost effort.

NATIONAL ASSISTANCE ACT.

There was no occasion to use the provisions of Section 47 of the National Assistance Act, 1948, or the Amendment Act, 1951, during the period under review.

MENTAL HEALTH SERVICE.

The Mental Hospitals are more and more adapted to care for patients on a short-term basis, and the means to discharge patients and keep them at home is one of the main aims of a comprehensive community service. All this indicates the necessity for combined planning and improved communication between the various agencies, so that patients have a continuity of treatment of the right kind. Cultural attitudes in the country have undergone a certain change towards the psychiatric patient, but there is still a reluctance on the part of the patient towards admission to hospital.

Psychiatric Out-patient Clinics have been opened in many large general hospitals, often staffed by Consultants from the local Mental Hospitals, resulting in a better and more understanding relationship between general and mental hospitals. The patient is the concern of the general practitioner, psychiatrist and mental welfare officer, and all three must work together. This will be a reality in Ecclesfield when family doctor, psychiatrist, mental welfare officers and other agencies can meet under the same roof and be able to discuss the patients' needs easily and immediately at the new Health Centre.

There was a 100% increase in patients attending the Out-patient Clinic held at Mortomley Hall in 1968. This does not mean that mental illness is on the increase, but that more and more people are concerned about their mental health and seek advice and help for their many problems. It is encouraging to see relatives and friends accompanying the patients to the clinic; they not only show a concern for the patient, but are able to see and feel the atmosphere of a psychiatric clinic away from the hospital surroundings. A total of 236 patients attended the 48 clinic sessions during the year.

There were no serious problems or delays in obtaining beds for patients who required treatment.

A number of students visited the Division during the year and observed the work of the mental welfare officer.

ADMISSIONS AND DISCHARGES TO MENTAL HOSPITALS.

There were 4 patients (1 male and 3 female) admitted to Middlewood Hospital during the year, and 2 female patients were discharged, after-care being requested in both cases.

MENTAL SUBNORMALITY.

The Friday morning out-patient clinics for subnormal patients continued during the year. A total of 36 juveniles were seen over the 27 sessions. This clinic gives opportunity for parents of severely handicapped children to discuss their many problems with the Consultant Psychiatrist.

No problems were experienced in placing subnormal children in short-stay-care hospital beds. This service is a great help to parents and fully appreciated by myself and mental welfare officers.

The Parent/Teachers' Association gave valuable help in organising a successful year of social activities.

SPECIAL CARE UNIT.

During the year this unit was taking in its maximum number of handicapped children, and apart from holidays, sickness and other domestic problems, 11 children attended 5 days a week.

The following are statistics of the mentally subnormal cases in the area.

Care and Guidance.

<u>Over 16 years.</u>	<u>Male</u>	<u>Female</u>
In full employment	4	2
Fully employed and/or supervised at home.. ...	-	3
Training Centre	4	2
Married and managing their own affairs	-	-
<u>Under 16 years.</u>		
Training Centre	1	-
Care Unit	-	-
Cot case, unable to attend Care Unit	-	1
	<u>9</u>	<u>8</u>

DISTRIBUTION OF WELFARE FOODS.

The amount of Welfare Foods issued in Penistone Urban District during 1968 was as follows :-

National Dried Milk	...	...	387 tins
Cod Liver Oil	...	...	201 bottles
Vitamin A and D tablets	...	...	100 (packets of 45)
Orange Juice	...	...	2,860 bottles.

These foods are issued at the following Centres throughout the Division on the days and times stated :-

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>STOCKSBRIDGE URBAN DISTRICT</u>		
Child Welfare Centre, Johnson Street, Stocksbridge.	Thursday	2.00 - 4.00 p.m.
Brightside & Carbrook Co-op. Society, Deepcar Branch, Manchester Road, Deepcar.	During shop hours	
<u>PENISTONE URBAN DISTRICT</u>		
Child Welfare Centre, Shrewsbury Road, Penistone.	Monday	2.00 - 4.00 p.m.
<u>PENISTONE RURAL DISTRICT</u>		
Child Welfare Centre, Golf Club, Cawthorne.	Alternate Wednesdays	1.30 - 3.30 p.m.
P. & C. Sinclair, The Stores, Halifax Road, Thurgoland.	During shop hours	
<u>HOYLAND NETHER URBAN DISTRICT</u>		
Child Welfare Centre, Rockingham Youth Club, Sheffield Rd., Hoyland Common.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Leisure Centre, King Street, Hoyland.	Tuesday	11.00 - 12.00 a.m. 2.00 - 4.00 p.m.
<u>WORTLEY RURAL DISTRICT</u>		
Clinic, Zion Congregational Church, Langsett Road South, Oughtibridge.	Thursday	2.00 - 4.00 p.m.
Clinic, Memorial Hall, Worrall.	Alternate Tuesdays	2.00 - 4.00 p.m.
Child Welfare Centre, Greenhead Wesleyan Reform Chapel, Greenhead Lane, Chapeltown.	Wednesday	11.00 - 12.00 a.m. 2.00 - 4.00 p.m.

WORTLEY RURAL DISTRICT (Cont'd.)

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
Clinic, Methodist Chapel, High Green.	Tuesday	2.00 - 4.00 p.m.
Colley Estate Clinic, Wheata Place, Sheffield, 5.	Monday	2.00 - 4.00 p.m.
Clinic, Community Hall, Main Street, Grenoside.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Wharncliffe Silkstone Welfare Hall, Pilley, Nr. Barnsley.	Alternate Mondays	2.00 - 4.00 p.m.
Child Welfare Centre, Knowle Top, Stannington.	Wednesday	2.00 - 4.00 p.m.
Child Welfare Centre, Congregational Church, Loxley.	Alternate Tuesdays	1.30 - 3.30 p.m.
Mrs. D. Harper, The Shop, Main Road, Dungworth.	During shop hours.	

SANITARY CIRCUMSTANCES OF THE AREA.

(Prepared by Mr. D. Tutin)

DWELLING HOUSES.

	<u>1968</u>
Inspections under Housing Regulations	12
Reinspections under Housing Regulations	6
Inspections not under Housing Regulations	158
Reinspections not under Housing Regulations	132

NUMBER OF VISITS TO:

Slaughterhouses	687
Butchers shops	12
Other food premises	72
Public conveniences	26
Market	206
Licensed premises	12
Refuse tips	97

OFFICES SHOPS AND RAILWAY PREMISES ACT, 1963.

Initial visits	2
Reinspections	18

INSPECTIONS UNDER

Petroleums Acts	12
Factories Acts	18

INFECTIOUS DISEASES.

Primary visits	6
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DRAINAGE.

New lengths inspected and tested	286
Drainage nuisances.	29

OTHER INSPECTIONS AND VISITS.

Rodent Control	72
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NUISANCES ETC. ON BOOKS WITH NUMBER OF NOTICES SERVED.

Nuisances in hand, end of 1967	70
Nuisances found during 1968	28
Notices served, informal	28
Nuisances abated during 1968	12
Nuisances outstanding at end of 1968	86

FOOD PREMISES.

The following food premises exist in the area :-

- 29 Grocers and General Dealers.
- 6 Confectioners and Sweet Shops.
- 3 Bakehouses.
- 1 Chicken Processing Factory.
- 6 Butchers.
- 3 Greengrocers.
- 2 Snackbars.
- 6 Fried Fish Shops.
- 15 Licensed Premises.

Routine visits were made to these premises during the year and, apart from minor contraventions, conditions were found to be satisfactory in all the cases.

OFFICES SHOPS AND RAILWAY PREMISES ACT, 1963.

The number of premises registered under the Act is as follows:-

- 3 Offices.
- 2 Banks.
- 30 Shops or other premises.

Routine inspections were carried out from time to time and conditions were generally found to be satisfactory.

MEAT INSPECTION.

12,861 animals were slaughtered during the year at the four slaughterhouses in the district and a hundred percent meat inspection was maintained. Some statistics regarding meat inspection are given in Appendix 1 to this report.

INFECTIOUS DISEASES.

During the year all notified cases of infectious disease were visited and the premises were disinfected if this was considered necessary.

REFUSE COLLECTION AND DISPOSAL.

The increase in the number of houses in the area continues to throw an additional burden on the refuse collection service but the difficulties, by and large, were overcome by the increased allocation of the Council's available labour staff to this work.

Conditions on the refuse tip are now reasonably satisfactory following the purchase last year of a tractor which works continually to keep the tip in order.

RODENT CONTROL.

All complaints of rodent infestation during the year were investigated and the necessary treatment carried out by the Council's own employees.

HOUSING AND PROPERTY MANAGEMENT.

The total number of men employed on Housing Repairs is as follows :-

- 1 Chargehand/Joiner.
- 2 Joiners.
- 3 Bricklayers.
- 1 Plumber.
- 2 Bricklayer's labourers.
- 1 Plumber's labourer.

In addition to ordinary house repairs, 24 fireplace conversions were carried out by direct labour and 92 Council houses were painted by contract. The total cost of housing repair work carried out during the year was £13377. 19s. 0d.

NEW HOUSES.

During the year 18 private houses and 44 Council houses were completed and 1 house was closed. This brings the total number of houses in the district to 2,909.

SEWERS AND SEWAGE DISPOSAL WORKS.

During the early part of the year it became known that the Council's proposal for new sewage disposal works on land at Oxspring had been turned down following the public enquiry and the Consultants are now preparing a scheme on an alternative site. Towards the end of the year work commenced on a new surface water sewer at Clarel Street and the renewal of one length of main sewer at Thurlstone Road.

Conditions at the Spring Vale sewage disposal works continue to be very difficult and the situation has to be kept constantly under review so as to ensure that the effluent standard is maintained as high as possible under the circumstances.

CATTLE MARKET.

The table below shows the total number of animals passing through the market during the year. The figures in brackets indicate the numbers during the previous year.

	CATTLE	CALVES	SHEEP	PIGS	TOTAL
Dairy	38 (28)	- -	35 (38)	102 (122)	175 (188)
Fatstock	5846 (5419)	380 (378)	4931 (5111)	2447 (3027)	13604 (13935)
					13779
					<u>TOTAL (14765)</u>

A P P E N D I X 1

MEAT AND FOOD INSPECTION

YEAR 1968.

All animals whose slaughter was notified during the year have been inspected and those showing evidence of disease examined in detail.

The total weight of meat and offal condemned as unfit for human consumption was 10 tons 5 cwt. 54lbs.

	W. Marsden	E. Marsden	Helliwell	Hincliff	Total
Cows	1,803	-	4	48	1,855
Other cattle	1,127	97	104	361	1,689
Calves	27	-	1	44	72
Sheep	4,294	7	316	616	5,233
Pigs	3,503	2	85	422	4,012
					Total .....12,861

The following table shows the number of animals slaughtered and the percentage affected with tuberculosis or other disease :-

	Cows	Cattle Excluding Cows	Sheep and Lambs	Calves	Pigs
Number inspected	1,855	1,689	5,233	72	4,012
<u>All disease except tuberculosis</u>					
Whole carcasses condemned	10	1	17	5	7
Carcasses of which some part or organ was condemned	546	199	629	1	908
Percentage of carcasses affected with disease other than tuberculosis	30.0	11.8	12.3	8.3	22.8
<u>Tuberculosis only</u>					
Carcasses of which some part or organ was condemned	-	-	-	-	64
Percentage of carcasses affected with tuberculosis	-	-	-	-	1.6

Details of carcasses and part carcasses condemned are given below :-

<u>Class of Animal</u>	<u>Disease or Condition</u>
1 Carcase of Mutton	Poly Arthritis
1 Carcase of Mutton	Ill Bled
2 Carcases of Mutton	Extensive Bruising
9 Carcases of Mutton	Poor and Oedematous
3 Carcases of Mutton	Septic Pneumonia
1 Carcase of Mutton	Moribund State
1 Carcase of Beef	Septicaemia
2 Carcases of Beef	Fevered
1 Carcase of Beef	Johnes
1 Carcase of Beef	Acute Septic Pericarditis
1 Carcase of Beef	Anaemia and Emaciation
1 Carcase of Beef	Ill Bled
1 Carcase of Beef	Septic Pneumonia
2 Carcases of Beef	Ill Bled and Johnes
1 Carcase of Beef	Emaciated
3 Carcases of Pork	Multiple Abscesses
1 Carcase of Pork	Acute Swine Erysipelas
1 Carcase of Pork	Arthritic and Bruising
3 Carcases of Veal	Immature
1 Carcase of Veal	Umbilical Pyaemia
1 Carcase of Veal	Joint Ill
21 Part Carcases of Mutton	Arthritic
1 Part Carcase of Mutton	Abscessed
5 Part Carcases of Mutton	Fracture and Bruising
2 Part Carcases of Mutton	Septic
4 Part Carcases of Beef	Bruising
4 Part Carcases of Pork	Arthritic
1 Part Carcase of Pork	Bruising and Mastitis
1 Part Carcase of Pork	Abscessed

The following offals were condemned for various reasons too numerous to set out in detail :-

422 Sheep Lungs	19 Beast Intestines
167 Sheep Livers	15 Beast Spleens
5 Sheep Plucks	4 Beast Skirts
4 Sheep Intestines	152 Beast Lungs
3 Sheep Stomachs	1 Beast Tail
3 Sheep Spleens	59 Pig Hearts
4 Sheep Hearts	245 Pig Livers
1 Sheep Kidney	615 Pig Lungs
549 Beast Livers	35 Pig Stomachs
110 Beast Kidneys	56 Pig Intestines
17 Sheep Stomachs	7 Pig Spleens
47 Beast Udders	30 Pig Heads
10 Beast Heads	1 Pig Kidney
9 Beast Tongues	44 Pig Plucks
21 Beast Hearts	1 Calf Stomach

A P P E N D I X II

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

IN RESPECT OF THE YEAR 1968 FOR THE

URBAN DISTRICT OF PENISTONE

IN THE COUNTY OF YORKSHIRE

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937.

PART ONE OF THE ACT.

1 - INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH (INCLUDING INSPECTIONS MADE BY PUBLIC HEALTH INSPECTORS).

P r e m i s e s (1)	Number of			
	Number on Register (2)	Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Section 1,2,3,4, and 6 are to be enforced by Local Authority.	1	4		
(ii) Factoris not included in (i) in which Section 7 is enforced by the Local Authority.	28	13		
(iii) Other premises in which Section 7 is enforced by the Local Authority (Excluding out 'workers' premises).	7	4		
	36	21		

2 - Cases in which DEFECTS were found - NIL

